

Agency 71

Kansas Dental Board

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Article 1.—GENERAL RULES

71-1-1. (Authorized by K.S.A. 65-1428, 65-1429; effective Jan. 1, 1966; revoked Feb. 20, 2004.)

71-1-2. (Authorized by K.S.A. 65-1427, 65-1428; effective Jan. 1, 1966; amended, E-77-9, March 19, 1976; amended Feb. 15, 1977; amended May 1, 1980; revoked Feb. 20, 2004.)

71-1-3. (Authorized by K.S.A. 65-1426; implementing K.S.A. 65-1427, 65-1428, 74-1405; effective Jan. 1, 1966; amended May 1, 1983; amended Nov. 7, 1997; revoked Feb. 20, 2004.)

71-1-4. Requirements for re-examination. (a) Each applicant who, upon taking any examination or any section thereof a second time, fails to obtain a passing grade on that examination or section of an examination shall obtain additional or remedial instruction. The dental board shall determine the amount and type of such required instruction based upon the performance of the applicant on the prior examinations. The required instruction shall be completed in a course and at a school of dentistry or dental hygiene approved by the board. The applicant shall submit a written statement, signed by an authorized member of the faculty of that school of dentistry or dental hygiene, advising the board or its designee that the applicant is qualified for re-examination.

(b) If any applicant fails to pass the examina-

tion or any section thereof on re-examination, following compliance with subsection (a) above, the board may, for good cause shown by the applicant, authorize further re-examination. In such case, the board may accept the results of any re-examination of that applicant conducted thereafter by the national board of dental examiners or by any other testing agency, the results of which are otherwise accepted by the board. (Authorized by and implementing K.S.A. 1983 Supp. 65-1429; effective Jan. 1, 1966; amended May 1, 1984.)

71-1-5. (Authorized by K.S.A. 65-1434; effective Jan. 1, 1966; amended, E-77-9, March 19, 1976; amended Feb. 15, 1977; amended May 1, 1980; amended May 1, 1981; revoked May 1, 1985.)

71-1-6. (Authorized by K.S.A. 65-1434; effective Jan. 1, 1966; amended May 1, 1981; revoked May 1, 1985.)

71-1-7. (Authorized by K.S.A. 65-1426, 65-1428; effective Jan. 1, 1966; revoked May 1, 1981.)

71-1-8. (Authorized by K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1979; revoked Feb. 20, 2004.)

71-1-9. Examination on dental law of Kansas. All candidates for a Kansas dental license as well as all candidates for a Kansas dental hygienist's license will be required to pass a satisfactory examination on the pertinent provisions of

the Kansas dental law pertaining to the practice of dentistry and the practice of dental hygiene. (Authorized by K.S.A. 65-1426, 65-1427, 65-1428, 65-1455; effective Jan. 1, 1966.)

71-1-10. (Authorized by K.S.A. 65-1459; effective Jan. 1, 1966; revoked Feb. 20, 2004.)

71-1-11. (Authorized by K.S.A. 65-1427, 65-1429, 65-1447; effective Jan. 1, 1966; revoked Feb. 20, 2004.)

71-1-12. (Authorized by K.S.A. 65-1431; effective Jan. 1, 1966; revoked May 1, 1985.)

71-1-13. (Authorized by and implementing K.S.A. 65-1438, 74-1406; effective May 1, 1980; revoked March 6, 1995.)

71-1-14. (Authorized by and implementing K.S.A. 65-1437; effective May 1, 1984; amended May 1, 1986; revoked May 1, 1988.)

71-1-15. Dental recordkeeping requirements. For the purposes of K.S.A. 65-1436 and amendments thereto, each licensee shall maintain for each patient an adequate dental record for 10 years after the date any professional service was provided. Each record shall disclose the justification for the course of treatment and shall meet all of the following minimum requirements:

- (a) It is legible.
- (b) It contains only those terms and abbreviations that are comprehensible to similar licensees.
- (c) It contains adequate identification of the patient.
- (d) It indicates the date any professional service was provided.
- (e) It contains pertinent and significant information concerning the patient's condition.
- (f) It reflects what examinations, vital signs, and tests were obtained, performed, or ordered and the findings and results of each.
- (g) It indicates the initial diagnosis and the patient's initial reason for seeking the licensee's services.
- (h) It indicates the medications prescribed, dispensed, or administered and the quantity and strength of each.
- (i) It reflects the treatment performed or recommended.
- (j) It documents the patient's progress during the course of treatment provided by the licensee. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1436; effective May 1, 1988; amended Feb. 20, 2004.)

71-1-16. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(g); effective May 10, 1993; amended Sept. 6, 1994; revoked Nov. 7, 1997.)

71-1-17. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(g); effective May 10, 1993; amended Sept. 6, 1994; revoked Nov. 7, 1997.)

71-1-18. Sterilization and infection control. (a) As used in this regulation, the following definitions shall apply:

(1) "Dental health care worker" means dentist, dental hygienist, dental assistant, or other employee of the dentist, or any other person who performs or participates in an invasive or exposure-prone procedure or functions ancillary to invasive procedures.

(2) "Exposure-prone procedure" means a procedure in which there is an increased risk of percutaneous injury to the dental health care worker by virtue of digital palpation of a needle tip or other sharp instrument in a body cavity or simultaneous presence of the dental health care worker's fingers and a needle or other sharp instruments in a poorly visualized or highly confined anatomic site, or any other circumstance in which there is a significant risk of contact between the blood or body fluids of the dental health care worker and the blood or body fluids of the patient.

(3) "HBsAg seropositive" means that the presence of the hepatitis B antigen has been confirmed by a test meeting the criteria of federal centers for disease control.

(4) "HBV" means the hepatitis B virus.

(5) "HIV" means the human immunodeficiency virus.

(6) "HIV seropositive" means that the presence of HIV antibodies has been confirmed by a test meeting the criteria of the federal centers for disease control.

(7) "Invasive procedure" means any surgical or other diagnostic or therapeutic procedure involving manual or instrumental contact with or entry into any blood, body fluids, cavity, internal organ, subcutaneous tissue, mucous membrane, or percutaneous wound of the human body.

(b) Each dental health care worker who performs or participates in an invasive or exposure-prone procedure shall observe and adhere to infection control practices and universal blood and body fluid precautions. For the purpose of infection control, all dental staff members and all pa-

tients shall be considered potential carriers of communicable diseases. Infection control procedures shall be required to prevent disease transmission from patient to doctor and staff, doctor and staff to patient, and patient to patient. Each dentist shall be required to comply with the applicable standard of care in effect at the time of treatment. Precautions shall include the following minimum standards.

(1) Each dental health care worker shall routinely use protective barriers and surface decontamination.

(A) Gloves shall be used by the dentist and direct care staff during any treatment involving procedures or contact with items potentially contaminated with the patient's bodily fluids or other dental debris. Fresh gloves shall be used for each patient. Gloves that have been used for dental treatment shall not be reused for any other purpose.

(B) Surgical masks and protective eyewear or chin-length plastic face shields shall be worn to protect the face, the oral mucosa, and the nasal mucosa when splashing or splattering of blood or other body fluids is likely.

(C) Reusable or disposable gowns, laboratory coats, or uniforms shall be worn when clothing is likely to be soiled with blood or other body fluids. If reusable gowns are worn, they may be washed, using a normal laundry cycle. Gowns shall be changed at least daily or when visibly soiled with blood.

(D) Surface decontamination and disinfection or protective barriers shall be used in areas of the dental operatory that may be contaminated by blood or saliva during treatment and are not removable to be sterilized. Contaminated surface coverings shall be removed, discarded, and then replaced with clean material between patients. Surfaces to be covered or decontaminated and disinfected shall include the following:

- (i) The delivery unit;
- (ii) chair controls;
- (iii) light handles;
- (iv) the high-volume evacuator handle;
- (v) x-ray heads and controls;
- (vi) headrests; and
- (vii) instrument trays.

(E) Dental health care workers shall wash their hands after glove removal if the hands have been contaminated by bodily fluids or other dental debris.

(F) Dental health care workers who have exu-

dative lesions or weeping dermatitis shall refrain from all direct patient care and from handling patient care devices used in exposure-prone invasive procedures, unless covered by an effective barrier.

(2) Dental health care workers shall take appropriate precautions to prevent injuries caused by needles, scalpels, and other sharp instruments during and after procedures. If during a single visit a patient needs multiple injections over time from a single syringe, the needle shall be recapped or placed in a sterile field between each use to avoid the possibility of needlestick injury or needle contamination. Used sharp items shall be placed in puncture-resistant containers for disposal.

(3) Any heat-stable instrument or device that enters tissue or contacts the mucous membranes shall be sterilized. Dental health care workers shall comply with the following sterilization requirements:

(A) Before sterilization, all instruments shall be decontaminated to remove all visible surface contamination, including blood, saliva, tooth and dental restorative material cuttings and debris, soft tissue debris, and bacterial plaque. Decontamination of instruments may be accomplished by a thorough scrubbing with soap and water or detergent, or by using a mechanical device, including an ultrasonic cleaner. Persons involved in cleaning instruments shall take reasonable precautions to prevent injuries.

(B) Heat-stable dental instruments shall be routinely sterilized between patient use by one of the following methods:

- (i) Steam under pressure autoclaves;
- (ii) heat plus pressurized chemical (unsaturated formaldehyde or alcohol);
- (iii) vapor chemoclave;
- (iv) prolonged dry heat exposure;
- (v) dry heat convection sterilizers;
- (vi) ethylene oxide sterilizers; or
- (vii) other equivalent methods.

(C) Biological spore testing devices shall be used on each sterilization unit after each six days of use, but not less often than each month, to verify that all pathogens have been killed. A log of spore testing shall be kept for three years for each sterilization unit.

(D) Items to be sterilized shall include the following:

- (i) Low-speed handpiece contra-angles and prophyl-angles;
- (ii) high-speed handpieces;

- (iii) hand instruments;
- (iv) burs;
- (v) endodontic instruments;
- (vi) air-water syringe tips;
- (vii) high-volume evacuator tips;
- (viii) surgical instruments; and
- (ix) sonic or ultrasonic periodontal scalers.

(E) When sterilizing the heat-stable instruments or devices listed in paragraphs (b)(3)(D)(i) through (ix), each instrument or device shall be placed in a closed bag or container for sterilization and thereafter maintained in that bag or container until immediately before use.

(F) Following the sterilization of heat-stable instruments or devices not listed in paragraphs (b)(3)(D)(i) through (ix), each instrument or device shall be maintained in covered storage until immediately before use.

(G) Nondisposable items used in noninvasive procedures that cannot be heat sterilized shall be decontaminated and disinfected with a chemical sterilant that has been registered by the U.S. Environmental Protection Agency and is tuberculocidal.

(H) Materials, impressions, and intra-oral appliances shall be decontaminated and disinfected before being sent to and upon return from a commercial dental laboratory.

(I) A dental health care worker who is HBeAg seropositive or HIV seropositive, or who otherwise knows or should know that the worker carries and is capable of transmitting HBV or HIV, shall not thereafter perform or participate directly in an exposure-prone procedure unless the worker has sought counsel from an expert review panel. The expert review panel shall be composed of these individuals:

- (i) The dental health care worker's personal physician;
- (ii) an infectious disease specialist with expertise in HIV and HBV transmission;
- (iii) a dentist licensed in the state of Kansas with expertise in procedures performed by the health care worker; and
- (iv) a state of Kansas or local public health official.

(c) Reports and information furnished to the Kansas dental board relative to the HBeAg or HIV status of a dental health care worker shall not be deemed to constitute a public record but shall be deemed and maintained by the board as confidential and privileged as a medical record. These reports and this information shall not be subject

to disclosure by means of subpoena in any judicial, administrative, or investigative proceeding, if the dental health care worker adheres to the regulations of the board and is willing to participate in counseling and be reviewed and monitored by the board or its designated agent.

(d) When the board learns that a dental health care worker is HBeAg or HIV seropositive, contact shall be made with that dental health care worker to review the regulations of the board and develop a process of monitoring that individual's practice.

(e) The monitoring of a dental health care worker's HIV or HBV status and discipline of the dental health care worker shall be reported to the Kansas department of health and environment, but shall remain confidential.

(f) During business hours, the office of a licensed dentist may be inspected by the Kansas dental board or its duly authorized agents and employees in order to evaluate compliance with this regulation. A written evaluation shall be given to the licensed person or office representative, and a copy shall be filed with the Kansas dental board. (Authorized by K.S.A. 74-1406; implementing K.S.A. 1998 Supp. 65-1436; effective Dec. 27, 1993; amended Jan. 3, 2000.)

71-1-19. Proration of fees. (a) Beginning June 1, 1997, each dentist applying for licensure on or after the first day of January shall pay $\frac{1}{24}$ th of the biennial renewal fee for each full month remaining in the renewal period, in addition to the application fee.

(b) Beginning June 1, 1997, each dental hygienist applying for licensure on or after the first day of January shall pay $\frac{1}{24}$ th of the renewal fee for each full month remaining in the renewal period, in addition to the application fee. (Authorized by K.S.A. 65-1447 and 74-1406; implementing K.S.A. 65-1447; effective Nov. 7, 1997.)

71-1-20. Reinstatement of license fee. The penalty fee to be paid by any licensee seeking reinstatement of a cancelled license pursuant to K.S.A. 65-1431(e)(2), and amendments thereto, shall be \$200. (Authorized by K.S.A. 65-1426; implementing K.S.A. 1998 Supp. 65-1431, as amended by L. 1999, Ch. 149, § 5; effective May 5, 2000.)

71-1-21. Suspension, termination, or denial of licensee's authority to practice when found in contempt of court pursuant to

K.S.A. 20-1204a(f). (a)(1) Within 30 days after receipt of a court-ordered notice and a copy of the court order finding an individual in contempt of court in a child support proceeding, the individual shall be notified by the board in writing of the board's intent to suspend, deny, or withhold renewal of a license and of the individual's rights and duties under K.S.A. 74-147 and amendments thereto.

(2) If the notice accompanied by the court order provides inadequate information identifying the person in contempt, the person serving the notice shall be promptly contacted by the board for additional information. The 30-day notice shall commence when sufficient information identifying the person to contact is received.

(b) Notice to licensee. The written notice issued by the board shall inform the licensee of the following:

(1) The board's intent to deny, refuse to renew, or suspend the license commencing six months after the date the notice is issued unless the licensee furnishes to the board a court order releasing the individual from the contempt citation; and

(2) if the individual does not furnish the release before the expiration of the six-month period, the board's intent to commence proceedings to deny the issuance of, to refuse to renew, or to suspend the license following the summary procedure stated in K.S.A. 77-537 and amendments thereto.

(c) Temporary license.

(1) If an individual has applied for issuance or renewal of a license and is otherwise eligible, a temporary license shall be issued by the board and shall accompany the notice issued pursuant to subsection (b). The temporary license shall be valid for six months after the date of the notice issued according to subsection (b).

(2) If a licensee is eligible to request renewal of a license and has previously received the notice required by subsection (b), the temporary license shall be valid only for the remainder of the six-month period that commenced upon issuance of the notice.

(3) Each temporary license shall include a date of issuance and a date of expiration.

(4) A temporary license shall not be extended, unless the board decides to extend the temporary license for up to 30 days to prevent extreme hardship for a patient of the licensee.

(5) The licensee shall obtain a release from the court that found the individual in contempt before

the permanent license may be issued or renewed by the board.

(6) The release shall be furnished to the board before the expiration of the temporary license. If the release is not finished within the six-month period of time, the temporary license shall expire, and either of the following shall occur:

(A) Summary proceedings to deny issuance shall be commenced by the board.

(B) Renewal of the permanent license may be refused by the board.

(d) Hearing.

(1) If the licensee does not provide a copy of the release as specified in paragraph (c)(5) to the board within the six-month time period, the permanent license shall be denied, refused for renewal, or suspended by the board in accordance with the summary proceedings of K.S.A. 77-537 and amendments thereto.

(2)(A) The issues at the hearing shall be limited to the following:

(i) The identity of the individual;

(ii) the validity of the notices pursuant to K.S.A. 74-147 and amendments thereto; and

(iii) the validity of any additional conditions imposed by the board if the conditions are otherwise subject to review.

(B) Any issues related to child support shall not be subject to the board's jurisdiction.

(3) If the board issues an order denying, refusing to renew, or suspending a permanent license of an individual as specified in this subsection, the individual may apply for reinstatement of the application or license, as appropriate, if the individual furnishes a court order releasing the individual from the contempt citation and it is determined by the board that the individual is otherwise eligible for a license.

(e) Fees. If a license is denied, refused for renewal, or suspended, any fees paid by the individual shall not be refunded. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 1999 Supp. 74-146 and K.S.A. 1999 Supp. 74-147; effective May 5, 2000.)

Article 2.—SPECIALISTS

71-2-1. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended, E-77-9, March 19, 1976; amended Feb. 15, 1977; amended May 1, 1980; amended March 27, 1989; revoked Feb. 20, 2004.)

71-2-2. Branches of dentistry. The rec-

ognized branches of dentistry for which application may be made for a specialist's certificate shall be the following: dental public health, endodontics, oral and maxillofacial pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, pediatric dentistry, periodontics, and prosthodontics. These branches of dentistry shall be defined as follows:

(a) "Dental public health" means that branch of dentistry relating to the science and art of preventing and controlling dental diseases and promoting dental health through organized community efforts. Dental public health is the form of dental practice that serves the community rather than individual patients. This branch of dentistry is concerned with the dental health education of the public, with applied dental research, and with the administration of group dental care programs as well as the prevention and control of dental diseases on a community basis.

(b) "Endodontics" means that branch of dentistry concerning the morphology, physiology, and pathology of the human dental pulp and periradicular tissues. The study and practice encompass the basic and clinical sciences, including the biology of the normal pulp; the etiology, diagnosis, prevention, and treatment of diseases and injuries of the pulp; and associated periradicular conditions.

(c) "Oral and maxillofacial pathology" means that branch of dentistry concerning the nature, identification, and management of diseases affecting the oral and maxillofacial regions. This branch is a science that investigates the causes, processes, and effects of these diseases. The practice of oral and maxillofacial pathology includes the research and diagnosis of diseases using clinical, radiographic, microscopic, biochemical, and other examinations.

(d) "Oral and maxillofacial radiology" means that branch of dentistry concerning the production and interpretation of images and data produced by all forms of radiant energy that are used for the diagnosis and management of diseases, disorders, and conditions of the oral and maxillofacial region.

(e) "Oral and maxillofacial surgery" means that branch of dentistry concerning the diagnosis and the surgical and adjunctive treatment of disease, injuries, and defects involving both the functional and esthetic aspects of the hard and soft tissues of the oral and maxillofacial region.

(f) "Orthodontics," which shall include "den-

tofacial orthopedics," means that branch of dentistry concerning the diagnosis, prevention, interception, and correction of malocclusion, as well as neuromuscular and skeletal abnormalities of the developing or mature orofacial structures.

(g) "Pediatric dentistry" means the branch of dentistry that is the age-defined specialty providing both primary and comprehensive prevention and therapeutic oral health care for infants and children through adolescence, including those with special health care needs.

(h) "Periodontics" means that branch of dentistry concerning the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes and the maintenance of the health, function, and esthetics of these structures and tissues.

(i) "Prosthodontics" means that branch of dentistry concerning the diagnosis, treatment planning, rehabilitation, and maintenance of the oral function, comfort, appearance, and health of patients with clinical conditions associated with missing or deficient teeth or oral and maxillofacial tissues, or both, using biocompatible substitutes. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended, E-77-9, March 19, 1976; amended Feb. 15, 1977; amended May 1, 1980; amended March 27, 1989; amended April 1, 2005; amended Dec. 30, 2005.)

71-2-3. Committee for specialists examination. After the election of officers of the board each year, an examining committee for each of the recognized branches of dentistry shall be appointed by the board. Each committee shall consist of two members, each of whom shall be licensed dentists holding a specialist's certificate in the specialty for which the committee is appointed. Each committee shall conduct the specialists' examination in its specialty. One of the committee members shall be designated chairman of the committee by the board. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1980; amended March 27, 1989.)

71-2-4. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1981; amended March 27, 1989; revoked Feb. 20, 2004.)

71-2-5. Qualifications and requirements of an applicant for certification as a specialist.

(a) Each applicant shall be licensed to practice dentistry in the state of Kansas.

(b) Each applicant shall have successfully completed a graduate program in the specialty for which certification is sought in a dental school, college, or other dental specialty training program that is approved by the board and that the board determines has standards of education not less than those required for accreditation by the commission on dental accreditation of the American dental association, or its equivalent, applicable for the year in which the training was completed.

(c) Any applicant who meets either of the following requirements may request a waiver of the board's requirement to pass a Kansas specialty examination:

(1) Holds a Kansas license to practice dentistry, holds a specialist certificate that is in the specialty for which certification is sought and that has been granted by a duly authorized licensing agency of another state, and has actively practiced in that specialty for the five-year period immediately before submitting an application for certification as a specialist in Kansas; or

(2) is a diplomat of the American board of the specialty for which certification is sought.

(d) To be eligible to take a specialty examination, each applicant shall file with the board an application, upon a form provided by the board, along with payment of the nonrefundable specialty certificate examination fee. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1979; amended May 1, 1980; amended May 1, 1981; amended March 27, 1989; amended June 4, 2004.)

71-2-6. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1979; amended May 1, 1980; amended May 1, 1985; amended March 27, 1989; revoked June 4, 2004.)

71-2-7. Additional requirements and qualifications for specialist. Unless a waiver is granted pursuant to K.A.R. 71-2-5, in addition to any other requirements of either the dental act or these regulations, each applicant for a specialist certificate shall meet the following requirements: (a) Submit with the application a transcript of all graduate-level dental education completed and a letter of reference from a practicing dentist who has personal knowledge of the applicant's experience and qualifications in the specialty for which a specialist certificate is sought; and

(b) pass a board-approved specialist examination for the specialty sought. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1979; amended May 1, 1980; amended May 1, 1981; amended March 27, 1989; amended June 4, 2004.)

71-2-8. (Authorized by K.S.A. 65-1427; effective Jan. 1, 1966; revoked May 1, 1980.)

71-2-9. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended May 1, 1980; amended March 27, 1989; revoked Feb. 20, 2004.)

71-2-10. (Authorized by K.S.A. 65-1427; effective Jan. 1, 1966; revoked May 1, 1981.)

71-2-11. Revocation or suspension of specialist certificate. Any dental specialist certificate may be revoked or suspended for any of the grounds upon which the board may discipline a dental licensee. (Authorized by and implementing K.S.A. 74-1406; effective Jan. 1, 1966; amended March 27, 1989; amended Sept. 17, 2004.)

71-2-12. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; amended March 27, 1989; revoked Feb. 20, 2004.)

71-2-13. (Authorized by and implementing K.S.A. 65-1427; effective Jan. 1, 1966; revoked March 27, 1989.)

Article 3.—DENTAL HYGIENISTS

71-3-1. Prohibited advertising. All independent advertising by a dental hygienist is hereby prohibited. (Authorized by K.S.A. 65-1456, 65-1457, 65-1458; effective Jan. 1, 1966.)

71-3-2. Permitted advertising. All advertising by a dental hygienist shall include the name of a Kansas-licensed dentist with whom the dental hygienist is employed or associated. If the name of a dental hygienist is used in advertising, the name shall be accompanied by the designation "R.D.H." or "dental hygienist." (Authorized by and implementing K.S.A. 2003 Supp. 65-1456; effective Jan. 1, 1966; amended May 1, 1979; amended Sept. 17, 2004.)

71-3-3. (Authorized by K.S.A. 65-1456 and K.S.A. 74-1406(l); implementing K.S.A. 65-1456;

effective Jan. 1, 1966; amended May 24, 1993; amended Sept. 6, 1994; revoked Nov. 7, 1997.)

71-3-4. Duty to notify board of residence and office address. Each dental hygienist shall notify the board in writing of any change in the following, within 30 days of the change:

- (a) The hygienist's residence address;
- (b) the hygienist's employer or employers; and
- (c) the hygienist's practice location or locations. (Authorized by K.S.A. 74-1406; implementing K.S.A. 2003 Supp. 65-1456; effective Jan. 1, 1966; amended Sept. 17, 2004.)

71-3-5. (Authorized by K.S.A. 65-1455, 65-1456, 65-1457, 65-1458; effective Jan. 1, 1966; revoked Feb. 20, 2004.)

71-3-6. (Authorized by K.S.A. 1979 Supp. 65-1456; effective Jan. 1, 1966; revoked May 1, 1980.)

71-3-7. Procedures that may be performed under general supervision. Any hygienist licensed in Kansas may perform, under direct or general supervision, any procedure that a hygienist is authorized by the Kansas dental practices act to perform, except the administration of local anesthesia, which shall be performed only under direct supervision. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1997 Supp. 65-1456(d), as amended by L. 1998, Ch. 141, Sec. 2; effective Feb. 12, 1999.)

71-3-8. Refresher course. (a) An eligible dental hygienist may, except as provided in subsection (e) below, return to the practice of dental hygiene without the requirement of a clinical examination, upon submitting an application on a form provided by the board and providing proof of having successfully completed a refresher course approved by the board.

(b) For purposes of this regulation, an eligible dental hygienist shall be an individual who meets the following requirements:

- (1) Was previously licensed to practice dental hygiene;
- (2) has not been disciplined by the licensing board in any state in which the individual has been licensed to practice dental hygiene;
- (3) has practiced dental hygiene; and
- (4) meets the other requirements for licensure set forth in K.S.A. 65-1455, and amendments thereto.

(c) For a refresher course to be approved by

the board, it shall meet the following minimum criteria:

(1) Be taught at a dental hygiene school approved by the board;

(2) consist of a minimum of 48 clock hours, including a minimum of 32 clock hours of clinical instruction;

(3) include didactic coursework, which may be presented in a classroom or independent study setting, or both, and clinical coursework covering the following:

- (i) Infection control and sterilization;
- (ii) patient assessment, including the taking of health histories, an oral inspection and evaluation, and charting;
- (iii) radiographic techniques;
- (iv) instrumentation techniques, including periodontal procedures and instrument sharpening;
- (v) current techniques in the polishing of teeth and the application of fluoride;
- (vi) patient education;
- (vii) emergency situations; and
- (viii) the current Kansas dental laws; and

(4) include final written and clinical evaluations that require a minimum passing score of 75 percent.

(d) As a further condition of returning to the practice of dental hygiene, the dental hygienist may be required to appear before the board.

(e) A formerly retired or disabled dental hygienist who is returning to the practice of dental hygiene, without the requirement of a clinical examination, may not administer local anesthesia or nitrous oxide until having completed courses of instruction in local anesthesia and nitrous oxide approved by the board. (Authorized by K.S.A. 1999 Supp. 65-1431, as amended by L. 2000, ch. 169, sec. 7 and K.S.A. 74-1406, as amended by L. 2000, ch. 169, sec. 18; implementing K.S.A. 1999 Supp. 65-1431, as amended by L. 2000, ch. 169, sec. 7; effective Sept. 1, 2000.)

71-3-9. Extended care permits. (a) Definitions.

(1) "Extended care permit I" shall mean a permit issued pursuant to K.S.A. 65-1456(f), and amendments thereto.

(2) "Extended care permit II" shall mean a permit issued pursuant to K.S.A. 65-1456(g), and amendments thereto.

(3) "Extended care permit treatment" shall mean the treatment that a hygienist may provide

if the hygienist has a valid extended care permit I or II.

(4) "Patient assessment report" shall mean the report of findings and treatment required by K.S.A. 65-1456(f)(6) or (g)(6), and amendments thereto.

(5) "Sponsoring dentist" shall mean a dentist who fulfills the requirements of K.S.A. 65-1456(f)(3) or (g)(3), and amendments thereto.

(b) Application for permit. Each applicant for an extended care permit I or II shall file with the board a completed application on a form provided by the board.

(c) Notice of practice location to sponsoring dentist. Before providing extended care permit treatment at a new location, each hygienist shall inform the sponsoring dentist, orally or in writing, of the new address and the type of procedures to be performed there.

(d) Patient assessment reports.

(1) Each required patient assessment report shall include a description of the extended care permit treatment, the date or dates of treatment, and the hygienist's assessment of the patient's apparent need for further evaluation by a dentist.

(2) No later than 30 days from the date on which extended care permit treatment is completed, the hygienist providing the treatment shall cause the required patient assessment report to be delivered to the sponsoring dentist.

(3) When providing extended care permit treatment at a location operated by an organization with a dental or medical supervisor, the dental hygienist providing the extended care permit treatment shall also cause the required patient assessment report to be delivered to the dental or medical supervisor within 30 days from the date on which the extended care permit treatment is completed.

(e) Suspension of extended care permit treatment. If a hygienist's sponsoring dentist cannot or will not continue to function as a sponsoring dentist, the hygienist shall cease providing extended care permit treatment until the hygienist obtains a written agreement with a replacement sponsoring dentist.

(f) Review of patient assessment reports. A sponsoring dentist shall review each patient assessment report within 30 days of receiving the report. (Authorized by K.S.A. 74-1406(e); implementing K.S.A. 2003 Supp. 65-1456; effective Sept. 17, 2004.)

Article 4.—CONTINUING EDUCATION REQUIREMENTS

71-4-1. Continuing education credit hours required for renewal license of dentist and dental hygienist.

(a) Each dentist licensee shall submit to the board, with the license renewal application, evidence of satisfactory completion of at least 60 hours of continuing education courses that qualify for credit. Each dentist licensee who holds a specialist certificate shall provide evidence satisfactory to the board that at least 40 of the required 60 hours of continuing education are in courses in the specialty for which the licensee holds a specialist certificate. Each required course hour shall be completed in the 24-month period immediately preceding the date of expiration of the license. The term "courses" as used in article 4 of these regulations shall include courses, institutes, seminars, programs, and meetings.

(b) Each dental hygienist licensee shall submit, with the license renewal application, evidence of satisfactory completion of a minimum of 30 hours of continuing dental education courses that qualify for credit. Each course shall have been completed in the 24-month period immediately preceding the date of expiration of the dental hygienist license.

(c) An extension of time to complete a continuing education requirement may be granted by the board if it finds that good cause has been shown. (Authorized by K.S.A. 74-1406 and K.S.A. 65-1431; implementing K.S.A. 65-1431; effective May 1, 1978; amended May 1, 1986; amended March 27, 1989; amended Dec. 27, 1996; amended Feb. 20, 2004.)

71-4-2. Approved continuing dental education. The following general standards shall be used by the board in determining which courses will qualify for continuing dental education credits required as a condition for the annual renewal of dental and dental hygienist licenses:

(a) *Eligibility.* Only those courses which increase the dentist's or dental hygienist's clinical and theoretical dental knowledge or ability to provide care and treatment to patients shall qualify for credit in computing the required hours of continuing dental education. Any person or organization may apply in writing to the board for approval of any courses.

(b) *Courses.* Subject to the eligibility standards set forth in paragraph (a) above, all courses, both within and without the state of Kansas, offered by

any of the following organizations shall be approved for credit:

- (1) any college or university;
- (2) the American dental association, the national dental association, or their component and constituent societies and associations;
- (3) the American dental hygienists association and national dental hygienists association or their component and constituent societies and associations;
- (4) the academies and specialty organizations recognized by the dental board;
- (5) local dental society and dental hygiene society meetings;
- (6) dental or dental hygiene study club meetings; and
- (7) programs that are sponsored by the veterans administration or the armed forces and given at a United States government facility. One hour of credit shall be given for each hour in actual attendance at such courses.

(c) *Advanced study.* A waiver of continuing dental education requirements shall be granted if a licensee is engaged as a full-time student in graduate study, internships or a residency program in dentistry, any of the specialties of dentistry recognized by the board, or dental hygiene.

(d) *New graduates.* A waiver of the continuing dental education requirements shall be granted for the first year after a licensee graduates and becomes licensed.

(e) *Lecturing, presenting papers, or clinics, teaching.* Any licensee may receive a maximum of 10 hours of credit annually for any combination of lecturing, presenting papers or clinics or teaching subjects related to dentistry and dental hygiene. Credit for teaching courses involving repeated presentation of similar subject matters shall be limited to the time spent in one presentation.

(f) *Commercially sponsored courses.* Continuing dental education courses sponsored by any person, corporation, association or other entity on a profit-making basis shall be approved by the board for continuing dental education credit subject to the eligibility standards set forth in paragraph (a) above.

(g) Credit for programs of home study shall be allowed for eligible courses based upon the hours of continuing dental education credit established by the sponsor or producers of the course, subject to prior review and determination of the allowable hours of credit by the board.

(h) Credit may be granted, upon the applica-

tion of any licensee, for authorship of published dental articles or books or for teaching any approved dental education course. The hours of credit to be allowed shall be determined by the board. The maximum number of hours allowed shall be:

- (1) 10 hours for any single article;
 - (2) 20 hours for any book; and
 - (3) five hours for teaching a course.
- (i) Disabled or retired dentists.

(1) The dental education requirements shall be waived for licensees who are disabled or retired, as those terms are defined by statute. In order to return to active practice, after a period of disability or retirement, each licensee shall complete continuing dental education credit hours according to the following schedule:

(A) Licensed dentists:

(i) five or more years disability or retirement	100 hours
(ii) four years disability or retirement	80 hours
(iii) three years disability or retirement	70 hours
(iv) two years disability or retirement	60 hours
(v) one year disability or retirement	30 hours

(B) Licensed dental hygienists:

(i) five or more years disability or retirement	50 hours
(ii) four years disability or retirement	40 hours
(iii) three years disability or retirement	35 hours
(iv) two years disability or retirement	30 hours
(v) one year disability or retirement	15 hours

(2) Upon application of a licensee, all or any portion of the continuing dental education hours required of a licensee returning to practice may be waived if the licensee passes an examination determined by the board. Such an examination may be required in addition to completion of the continuing dental education hours required above. The examination may be written, oral or clinical, or all of these, at the board's determination. (Authorized by K.S.A. 74-1406 and K.S.A. 1984 Supp. 65-1431; implementing K.S.A. 1984 Supp. 65-1431; effective May 1, 1978; amended May 1, 1986.)

71-4-3. (Authorized by K.S.A. 74-1406 and K.S.A. 1995 Supp. 65-1431, as amended by L. 1996, ch. 210, sec. 3; implementing K.S.A. 1995 Supp. 65-1431, as amended by L. 1996, ch. 210, sec. 3; effective May 1, 1978; amended May 1, 1986; amended Dec. 27, 1996; revoked Feb. 20, 2004.)

Article 5.—SEDATIVE AND GENERAL ANAESTHESIA

71-5-1. Definitions. As used in these regulations and for the purpose of administering Ar-

ticle 5, the terms in this regulation shall be defined as follows.

(a) "Conscious sedation" means a minimally depressed level of consciousness in which the patient retains the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command.

(b) "Deep sedation" means a controlled state of depressed consciousness, accompanied by partial loss of protective reflexes, with occasional inability to respond purposefully to verbal command and maintain an adequate airway.

(c) "General anaesthesia" means a controlled state of unconsciousness, accompanied by a partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command.

(d) "Board" means the Kansas dental board. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1994 Supp. 65-144; effective Nov. 27, 1995.)

71-5-2. Level I and II permits; scope of treatment. (a) Level I permit. Except as set out under subsection (b), any licensed dentist who has been issued a Level I permit may administer conscious sedation in a dental office setting in accordance with these regulations. No licensed dentist shall administer intravenous or parenteral inhalation sedation agents other than nitrous oxide without first obtaining a Level I permit issued by the board.

(b) Level I permit; restrictions. A licensed dentist holding a Level I permit shall not be authorized to use any of the following agents:

- (1) Ultra-short acting barbiturates, such as:
 - (A) thiopental; or
 - (B) methohexitol;
- (2) ketamine; or
- (3) propofol.

(4) A Level I permit holder shall not use any inhalation anaesthetic agent other than nitrous oxide.

(c) Level II permits. Any licensed dentist who has been issued a Level II permit may administer conscious sedation, deep sedation or general anaesthesia in accordance with these regulations. (Authorized by K.S.A. 1994 Supp. 74-1406 and implementing K.S.A. 1994 Supp. 65-1444; effective Nov. 27, 1995.)

71-5-3. Level I permit requirements. (a)

A Level I permit for administration of conscious sedation in a dental office shall be issued to each licensed dentist who fulfills these requirements:

- (1) meets the education or experience requirements in subsection (b);
- (2) meets the requirements regarding facilities set out in subsection (c); and
- (3) has current certification in basic life support or its equivalent.

(b) Each licensed dentist applying for a Level I permit shall provide evidence of the following:

(1) satisfactorily completing one of the following:

(A) a minimum of 60 hours of instruction in intravenous conscious sedation, including didactic and supportive courses, provided by a training program approved by the board; or

(B) an internship or residency program that includes supervised experience in intravenous conscious sedation equal to the 60 hours of instruction required in paragraph (A); or

(2) having regularly engaged in the administration of conscious sedation in a competent manner for a period of three years immediately before the effective date of this regulation.

(c) Each licensed dentist applying for a Level I permit shall provide evidence satisfactory to the board that the dentist maintains a properly equipped facility that shall include the following:

- (1) a blood pressure monitor and stethoscope;
- (2) an oxygen delivery system with full face masks, including connectors capable of delivering oxygen under positive pressure; and
- (3) emergency drugs and equipment.

(d) Each Level I permit shall be renewed biennially on July 1 of odd-numbered years, on a form prescribed by the board. The biennial renewal fee shall be \$100.

(e) Each licensed dentist applying for a renewal of a Level I permit shall demonstrate that the dentist has maintained competence in administration of conscious sedation, by providing evidence of having performed a minimum of 20 Level I procedures during the two years preceding renewal. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1996 Supp. 65-1444; effective Nov. 27, 1995; amended Nov. 7, 1997.)

71-5-4. Level II permit requirements.

(a) A Level II permit for administration of deep sedation and general anaesthesia shall be issued to each licensed dentist who fulfills these requirements:

(1) meets the education or experience requirements in subsection (b);

(2) meets the requirements regarding facilities set out in subsection (c); and

(3) has current certification in basic life support or its equivalent.

(b) Each licensed dentist applying for a Level II permit shall provide evidence of the following:

(1) meeting the requirements for a Level I permit established under 71-5-3; and

(2)(A) satisfactorily completing one of the following:

(i) a course of study and residency program in anaesthesia approved by the board of healing arts;

(ii) an advanced oral and maxillofacial surgery program approved by the board; or

(iii) a minimum of one year of advanced training in anaesthesiology with standards not less than those established in the "guidelines for teaching the comprehensive control of pain and anxiety in dentistry," as published in 1992 and implemented in July, 1993 by the American dental association; or

(B) having regularly engaged in the administration of deep sedation or general anaesthesia in a competent manner for a period of three years immediately before the effective date of this regulation.

(c) Each licensed dentist applying for a Level II permit shall provide evidence satisfactory to the board that the dentist maintains a properly equipped facility that shall include the following:

(1) facilities specified in K.A.R. 71-5-3(c); and

(2) appropriate equipment for intubation and IV infusions.

(d) Each Level II permit shall be renewed biennially on July 1 of odd-numbered years, on a form prescribed by the board. The biennial renewal fee shall be \$100.

(e) Each licensed dentist applying for renewal of a Level II permit shall demonstrate that the dentist has maintained competence in the administration of deep sedation and general anaesthesia, by providing evidence of having performed a minimum of 48 Level II procedures during the two years preceding renewal. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1996 Supp. 65-1444; effective Nov. 27, 1995; amended Nov. 7, 1997.)

71-5-5. Level I and II permits; general requirements and procedures. (a) The dentist responsible for the sedation or anaesthesia pro-

cedure shall be physically present in the office with the patient at all times during the induction and maintenance of the procedure.

(b) Each licensed dentist holding a Level I or Level II permit shall submit a written report to the board within 30 days of any of the following occurrences related to the use of conscious sedation, deep sedation or general anaesthesia:

(1) death;

(2) any adverse occurrence which results in permanent organic brain dysfunction of the patient; or

(3) physical injury causing hospitalization of the patient within 24 hours of the procedure.

(c) Except in extreme emergencies, the licensed dentist shall ensure that the following procedures are completed prior to treatment for each patient requiring sedation or general anaesthesia:

(1) a preoperative evaluation by a licensed dentist regarding the choice of anaesthesia;

(2) a written medical history signed and dated by the patient or a responsible person; and

(3) laboratory testing, as indicated.

(d) Immediately before induction of the anaesthesia or sedation, the dentist performing the procedure shall review the patient's medical history records to determine whether the patient has any allergies to medications and to identify medications currently used by the patient.

(e) Each licensed dentist holding a Level I or Level II permit shall allow the board and its duly authorized agents or employees to inspect the dentist's office during business hours to ensure compliance with Article 5 of these regulations. An examination may be required as part of the inspection. Each office shall be inspected within one year following the issue of the permit and at least once during each five-year period thereafter. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1994 Supp. 65-1444; effective Nov. 27, 1995.)

71-5-6. Level I and II permits; revocation, suspension or limitation. (a) Any Level I and II permit may be revoked, suspended or limited by the board upon establishing that a permit holder:

(1) is no longer in compliance with one or more of the requirements of Article 5 of these regulations;

(2) has engaged in negligent or dangerous conduct; or

(3) has been convicted of a crime which would

affect the ability of the licensed dentist holding the permit to treat patients using conscious sedation, deep sedation or general anaesthesia.

(b) Prior to revocation, suspension or limitation of a Level I or Level II permit by the board, the licensed dentist holding the permit shall be provided notice and an opportunity for a hearing under the provisions of the administrative procedure act, K.S.A. 77-501 et seq., as amended. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1994 Supp. 65-1449; effective Nov. 27, 1995.)

Article 6.—DENTAL AUXILIARIES

71-6-1. Definitions. As used in these regulations, the following terms shall have the meanings indicated:

(a) “Approved instruction course” means a course of instruction that the board has found to meet the requirements listed in K.A.R. 71-6-3.

(b) “Coronal” means the portion of a tooth or tooth replacement visible above the gum line.

(c) “Coronal polish teeth” means to remove soft accretions and stains from coronal surfaces of teeth or tooth replacements.

(d) “Coronal scale teeth” means to remove hard deposits and accretions from the coronal surfaces of teeth or tooth replacements.

(e) “Direct supervision” means that the dentist is in the dental office, personally diagnoses the condition to be treated, personally authorizes the procedure, and, before dismissal of the patient, evaluates the performance or has it evaluated by another person licensed by the board. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1423; effective Feb. 12, 1999; amended April 16, 2004.)

71-6-2. Acts restricted. (a)(1) A nonlicensed person shall not perform coronal scaling as part of a prophylaxis without first obtaining a certificate demonstrating successful completion of an approved course of instruction.

(2) The supervising dentist shall not permit a nonlicensed person to perform coronal scaling as part of a prophylaxis until that person’s certificate, demonstrating successful completion of an approved course of instruction, is prominently posted at the location where the coronal scaling will be performed.

(b) A nonlicensed person shall not perform coronal scaling as a part of a prophylaxis on a patient who is under local or general anesthesia.

(c) A nonlicensed person may perform coronal

scaling only under the direct supervision of a supervising dentist licensed and practicing in Kansas. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1997 Supp. 65-1423(h)(5), as amended by L. 1998, Ch. 141, Sec. 1; effective Feb. 12, 1999.)

71-6-3. Approved instruction course. (a)

Each private or public educational entity seeking approval by the board, pursuant to L. 1998, Ch. 141, Sec. 1, of an instruction course shall demonstrate that the course meets the following minimum requirements:

(1) Has a student-instructor ratio consistent with the American dental association accreditation standards for dental assisting programs;

(2) encourages enrollment by a geographically diverse population of prospective students;

(3) includes the following course topics:

(A) Dental and gingival anatomy and morphology;

(B) periodontal disease, including recognition and treatment;

(C) dental plaque, stain, and calculus formation;

(D) sterilization and infection control;

(E) oral hygiene, with an emphasis on technique, products, and devices;

(F) topical fluoride application;

(G) the use of instruments, including technique, position, and sharpening;

(H) coronal scaling, including laboratory experience with mechanical and ultrasonic devices; and

(I) coronal polishing, including laboratory experience;

(4) is a minimum of 90 hours;

(5) includes one or more outcome assessment examinations that demonstrate that the student has obtained technical and clinical competency in the coronal scaling of teeth; and

(6) upon successful completion of the course, issuance by the offering educational entity of a certificate identifying the student and the date of successful completion.

(b) Before any proposed changes are made to the required elements of an approved instruction course, the changes shall be approved by the board. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1997 Supp. 65-1423(h)(5), as amended by L. 1998, Ch. 141, Sec. 1; effective Feb. 12, 1999.)

71-6-4. Subgingival scaling. Whenever

coronal scaling is performed as part of a prophylaxis by a nonlicensed person who has a certificate from an educational entity demonstrating successful completion of an approved course of instruction, all subgingival scaling shall be performed by a hygienist or dentist licensed in Kansas. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1997 Supp. 65-1423 (h)(5), as amended by L. 1998, Ch. 141, Sec. 1; effective Feb. 12, 1999.)

71-6-5. Duty to notify board. Each nonlicensed person who has received a certificate from an educational entity demonstrating successful completion of an approved course of instruction pursuant to K.S.A. 65-1423(a)(8)(E), and amendments thereto, shall meet the following requirements:

(a) Within 30 days of obtaining the certificate, provide a copy of the certificate to the board;

(b) notify the board, within 30 days of employment or change in employment, of the names and business addresses of all dentists who are employing or supervising the nonlicensed person; and

(c) within 30 days of any change in the identity or business location of any dentist employing the nonlicensed person, inform the board of the change. (Authorized by K.S.A. 74-1406; implementing K.S.A. 65-1423; effective Feb. 12, 1999; amended June 4, 2004.)

71-6-6. Coronal polishing. Any dentist licensed and practicing in Kansas may delegate to a nonlicensed person the coronal polishing of teeth if the dentist provides that person with direct supervision and has provided that person with the appropriate training in polishing techniques. (Authorized by K.S.A. 74-1406 and implementing K.S.A. 1997 Supp. 65-1423(h)(5), as amended by L. 1998, Ch. 141, Sec. 1; effective Feb. 12, 1999.)

Article 7.—ADVERTISING

71-7-1. Prior submission to the board.

Before a licensee, or anyone else acting on the licensee's behalf or on behalf of any associated or affiliated licensee, uses or participates in the use of any form of advertising that contains one or more statements regarding the professional superiority of or the performance of professional services in a superior manner by the licensee or any associated or affiliated licensees, the licensee shall submit to the board evidence demonstrating the truthfulness of each such statement. (Author-

ized by and implementing K.S.A. 65-1437; effective Feb. 20, 2004.)

Article 8.—MOBILE DENTAL FACILITIES AND PORTABLE DENTAL OPERATIONS

71-8-1. Applicability of other regulations. Each regulation applicable to a stationary dental office shall also apply to each mobile dental facility or portable dental operation. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-2. Registration fee. Each applicant for a registration to operate a mobile dental facility or portable dental operation shall pay a registration fee of \$500 per facility. (Authorized by K.S.A. 65-1447, as amended by L. 2005, ch. 115, § 1, and L. 2005, ch. 115, § 2; implementing K.S.A. 65-1447, as amended by L. 2005, ch. 115, § 1; effective Feb. 17, 2006.)

71-8-3. Renewal of registration. (a) Each operator who wants to renew the registration shall submit a renewal application, on a form provided by the board, at least 60 days before the expiration date.

(b) Each registrant shall pay a registration renewal fee of \$350 per facility when submitting the renewal application. (Authorized by K.S.A. 65-1447, as amended by L. 2005, ch. 115, § 1, and L. 2005, ch. 115, § 2; implementing K.S.A. 65-1447, as amended by L. 2005, ch. 115, § 1; effective Feb. 17, 2006.)

71-8-4. Office address and telephone number. (a) Each operator of a mobile dental facility or portable dental operation shall maintain a business or mailing address of record, which shall be filed with the board. This address shall not be a post office box.

(b) Each operator of a mobile dental facility or portable dental operation shall maintain a telephone number of record, which shall be filed with the board.

(c) Each operator shall notify the board within 30 days of any change in the address or telephone number of record.

(d) Each written or printed document available from or issued by the mobile dental facility or portable dental operation shall contain the address and telephone number of record for the mobile dental facility or portable dental operation.

(e) Each operator shall maintain all dental and billing records, when not in transit, at the address

of record. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-5. Written procedures; communication facilities; conformity with requirements; driver requirements; consent forms; follow-up treatment. Each operator of a mobile dental facility or portable dental operation shall ensure that the following conditions and requirements are met:

(a) A written procedure for emergency follow-up care is used for patients treated in the mobile dental facility or portable dental operation, and the procedure includes arrangements for treatment in a health care facility that is permanently established in the area where services were provided.

(b) The mobile dental facility or portable dental operation has communication facilities that will enable the operator to contact necessary parties if a medical or dental emergency occurs. The communications facilities shall enable the patient or the parent or guardian of the patient treated to contact the operator for emergency care, follow-up care, or information about treatment received. The health care provider who renders follow-up care shall also be able to contact the operator and receive treatment information, including radiographs when taken.

(c) The mobile dental facility or portable dental operation and the dental procedures performed meet the requirements of K.A.R. 71-1-18.

(d) The driver of the mobile dental facility or portable dental operation possesses a valid driver's license appropriate for the operation of the vehicle.

(e) No services are performed on minors or individuals for whom a guardian has been established without a signed consent form signed by the parent or guardian that includes the following:

(1) An authorization for the treatment to be provided;

(2) an acknowledgement by the parent or guardian that the treatment of the patient at the mobile dental facility or portable dental operation could affect the future benefits that the patient could receive under any of the following:

(A) Private insurance;

(B) medicaid; or

(C) a children's health insurance program; and

(3) an acknowledgement by the parent or guardian that the parent or guardian has been ad-

vised to arrange for continued dental care for the patient.

(f) If the mobile dental facility or portable dental operation accepts any patients and provides preventive treatment, including prophylaxis, radiographs, and fluoride, the operator offers follow-up treatment when this treatment is indicated. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-6. Identification of personnel; notification of changes in written procedures; display of licenses. (a) Each operator of a mobile dental facility or portable dental operation shall

identify and advise the board in writing within 30 days of any personnel change involving the licensed dentists and licensed dental hygienists associated with the mobile dental facility or portable dental operation. The operator shall provide the full name, address, telephone number and license number of each licensed dentist or licensed dental hygienist involved in the personnel change. The operator shall also provide the effective date of each personnel change.

(b) Each operator shall advise the board in writing within 30 days of any change in the written procedure for emergency follow-up care for patients treated in the mobile dental facility or portable dental operation, including arrangements for treatment in a health care facility that is permanently established in the area. The permanent health care facility shall be identified in the written procedure.

(c) Each dentist and dental hygienist providing dental services in the mobile dental facility or portable dental operation shall display that individual's Kansas dental license or Kansas dental hygienist license in plain view of the patients. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-7. Identification of location of services. (a) Each operator of a mobile dental facility or portable dental operation shall maintain a written or electronic record containing the following information for each location where services are provided:

(1) The street address of the service location;

(2) the date or dates of each session;

(3) the number of patients served; and

(4) the types of dental services provided and number of each type of service provided.

(b) Each operator of a mobile dental facility or portable dental operation shall make the record

specified in subsection (a) available to the board or its representative within 10 days of each request. The operator shall submit the record in a format approved by the board. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-8. Information for patients. (a) During or at the conclusion of each patient's visit to the mobile dental facility or portable dental operation, the patient, parent, or guardian shall be provided with an information sheet. If the patient, parent, or guardian has provided consent for an institutional facility to access the patient's dental health records, the institution shall also be provided with a copy of the information sheet. "Institutional facility" shall include a long-term care facility or school.

(b) Each information sheet shall include the following information:

(1) The address and telephone number of record required by K.A.R. 71-8-4;

(2) the name of each dentist and dental hygienist who provided services;

(3) a description of the treatment rendered, including the billed service codes and fees associated with the treatment, tooth numbers along with surface and quadrant descriptors when appropriate, and the names and telephone numbers of the billing entity and any third party being billed;

(4) the date of the services and the location where the services were rendered;

(5) the name and telephone number of the entity to contact for information regarding the processing and payment for billed services; and

(6) if necessary, referral information to another health care provider. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

71-8-9. Cessation of operations. (a) Upon cessation of operations by the mobile dental facility or portable dental operation, each operator shall notify the board, in writing and within 30 days of the last day of operations, of the final disposition of patient records and charts.

(b) As used in this regulation, "active patient" shall mean an individual whom the mobile dental facility or portable dental operation has examined, treated, cared for, or otherwise consulted with during the two-year period before discontinuing practice or moving from the community.

(c) Upon choosing to discontinue practice or

services in a community, each operator of a mobile dental facility or portable dental operation shall perform the following:

(1) Notify all of the operator's active patients in writing, or by publication once a week for three consecutive weeks in a newspaper of general circulation in the community, that the operator intends to discontinue the mobile dental facility or portable dental operation's practice in the community; and

(2) advise each active patient to seek the services of another dentist and document, in the patient's dental record, the date of the advice and the manner in which the advice was provided.

(d) Each operator shall make reasonable arrangements with the active patients of the mobile dental facility or portable dental operation for the transfer of each patient's records, including radiographs or copies, to the succeeding practitioner or, at the written request of the patient, parent, or guardian, to the patient, parent, or guardian.

(e) If the mobile dental facility or portable dental operation is sold, each new operator shall file a registration application and pay the registration fee specified in K.A.R. 71-8-2. Each new operator shall be required to receive board approval before providing services. (Authorized by and implementing L. 2005, ch. 115, § 2; effective Feb. 17, 2006.)

Article 9.—PRACTICE OF DENTISTRY BY A DENTAL STUDENT

71-9-1. Definitions. As used in this article, the following terms shall have the meanings specified in this regulation:

(a) "Dental student" means a person who meets the following requirements:

(1) Has completed at least 50 percent of the required hours of dental classroom and clinical training at an educational institution; and

(2) is currently enrolled as a student at an educational institution.

(b) "Educational institution" means a dental school approved by the board that has obtained approval from the board to operate an educational program, pursuant to K.S.A. 65-1423(a)(9) and amendments thereto, in which dental students will perform dentistry.

(c) "Supervising dentist" means a dentist who meets the following requirements:

(1)(A) Has an active license to practice dentistry in Kansas; or

(B) is eligible to be licensed in Kansas and has an application to be licensed in Kansas pending;

(2) has faculty status with an educational institution;

(3) has been assigned to a department of the educational institution and has agreed in writing to use the department's objectives in supervising and evaluating the work of the dental students; and

(4) has agreed in writing to confer as necessary, but at least annually, with the department chair and educational institution administrators to ensure that the educational activities supervised by the supervising dentist are being conducted to achieve the educational goals of the educational institution. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-9-2. Approval of educational program. The administrator of each educational program shall not permit any dental student to perform the practice of dentistry in this state unless the educational program has been approved by the board. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-9-3. Requirements for approval of educational program. To be approved, pursuant to K.S.A. 65-1423(a)(9) and amendments thereto, as an educational program in which the practice of dentistry may be performed by a dental student, the administrator of each educational program shall ensure that all of the following requirements are met:

(a) The administrator of the educational program shall file a written application with the executive director of the board. This application shall be submitted upon the form furnished by the board.

(b) The educational program shall be operated pursuant to a written affiliation agreement between an educational institution and either a licensee or an entity approved by the board. The affiliation agreement shall establish requirements for the educational program and the supervising dentist that are consistent with these regulations.

(c) Each dental student shall be permitted to practice dentistry only under the direct supervision of a supervising dentist.

(d) Patient records that meet the requirements of the Kansas dental practice act and the board's regulations shall be maintained.

(e) The administrator of the educational program shall have policies and procedures in place to ensure appropriate care of each patient treated in the program.

(f) Each dental student shall have professional liability coverage.

(g) All dental students performing dentistry shall be evaluated by a supervising dentist using methods approved by the educational institution.

(h) Before any patient receives dental services from a dental student, the patient shall sign a form indicating that patient's consent to being treated by a dental student. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-9-4. Notice of new location. The administrator of each educational program shall notify the board in writing at least 30 days before establishing a new location at which dental students will be practicing dentistry in the state of Kansas. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

Article 10.—PRACTICE OF DENTAL HYGIENE BY A DENTAL HYGIENE STUDENT

71-10-1. Definitions. As used in this article, the following terms shall have the meanings specified in this regulation:

(a) "Dental hygiene student" means a person who meets the following requirements:

(1) Has completed at least one semester of full-time dental hygiene education, including all pre-clinical courses, at an educational institution. For purposes of this article, "pre-clinical courses" shall mean the courses that are a prerequisite to academic clinical courses; and

(2) is currently enrolled as a student at an educational institution and is not currently licensed by the Kansas dental board.

(b) "Educational institution" means a dental hygiene school approved by the board that has obtained approval from the board to operate an educational program, pursuant to K.S.A. 65-1423(a)(9) and amendments thereto, in which dental hygiene students will perform dental hygiene.

(c) "Supervising dental hygienist" means a dental hygienist who meets the following requirements:

(1)(A) Has an active license to practice dental hygiene in Kansas; or

(B) is eligible to be licensed in Kansas and has an application to be licensed in Kansas pending;

(2) has faculty status with an educational institution;

(3) has been assigned to a department of the educational institution and has agreed in writing to use the department's objectives in supervising and evaluating the work of the dental hygiene students supervised; and

(4) has agreed in writing to confer as necessary, but at least annually, with the department chair and educational institution administrators to ensure that the educational activities supervised by the supervising dental hygienist are being conducted to achieve the educational goals of the educational institution.

(d) "Supervising dentist" means a dentist who meets the following requirements:

(1)(A) Has an active license to practice dentistry in Kansas; or

(B) is eligible to be licensed in Kansas and has an application to be licensed in Kansas pending;

(2) has faculty status with an educational institution;

(3) has been assigned to a department of the educational institution and has agreed in writing to use the department's objectives in supervising and evaluating the work of the dental hygiene students; and

(4) has agreed in writing to confer as necessary, but at least annually, with the department chair and educational institution administrators to ensure that the educational activities supervised by the supervising dentist are being conducted to achieve the educational goals of the educational institution. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-10-2. Approval of educational program. The administrator of each educational program shall not permit any dental hygiene student to perform the practice of dental hygiene in this state unless the educational program has been approved by the board. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-10-3. Requirements for approval of

educational program. To be approved, pursuant to K.S.A. 65-1423(a)(9) and amendments thereto, as an educational program in which the practice of dental hygiene may be performed by a dental hygiene student, the administrator of each educational program shall ensure that all of the following requirements are met:

(a) The administrator of the educational program shall file a written application with the executive director of the board. This application shall be submitted upon the form furnished by the board.

(b) The educational program shall be operated pursuant to a written affiliation agreement between an educational institution and either a licensee or an entity approved by the board. The affiliation agreement shall establish requirements for the educational program and for the supervising dentist or supervising dental hygienist that are consistent with these regulations.

(c) Each dental hygiene student shall be permitted to practice dental hygiene only under the direct supervision of a supervising dentist or a supervising dental hygienist.

(d) Patient records that meet the requirements of the Kansas dental practice act and the board's regulations shall be maintained.

(e) The administrator of the educational program shall have policies and procedures in place to ensure appropriate care of each patient treated in the program.

(f) Each dental hygiene student shall have professional liability coverage.

(g) All dental hygiene students performing dental hygiene shall be evaluated by a supervising dentist or a supervising dental hygienist using methods approved by the educational institution.

(h) Before any patient receives dental hygiene services from a dental hygiene student, the patient shall sign a form indicating that patient's consent to being treated by a dental hygiene student. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)

71-10-4. Notice of new location. The administrator of each educational program shall notify the board in writing at least 30 days before establishing a new location at which dental hygiene students will be practicing dental hygiene in the state of Kansas. (Authorized by K.S.A. 74-1406(l); implementing K.S.A. 65-1423(a)(9); effective Jan. 9, 2009.)